

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|----------|
| FEE DETERMINATION | | 953 | 4/ |
| O.I.P.E. CLASSIFIER | | 25 | 04-04-98 |
| FORMALITY REVIEW | 80 | 60959 | 4-30 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------------|------|
| Final Original | |
| 1 | ✓ |
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| Claim | Date |
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| Claim | Date |
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| Final Original | |
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If more than 150 claims or 10 actions
 staple additional sheet her

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